

## **Guaranteed Return Trip Program Guidelines**

#### Why It's Important

You may hesitate to rideshare because of a fear that you will be stranded at work if there is an emergency at home or if your carpool or vanpool driver must leave early. To address this issue, the Commuter Assistance Program developed the Guaranteed Return Trip Program. This program allows you to be confident that there is a program in place that will provide a ride when it is really needed. If you have any general questions, please call 714-834-4068.

#### **Eligibility Requirements**

The program is available to any County of Orange employees using a rideshare mode (carpool, vanpool, bus, or train) for the home to work commute on a day when an unexpected emergency occurs. An unexpected emergency includes illness, a childcare problem, or a severe crisis of the employee or an immediate family member; unscheduled overtime; or if you are stranded at work because your carpool or vanpool driver had to leave due to an emergency.

#### **How it Works**

You may be issued a County vehicle, if available. You must have valid drivers' license in your possession and be able to drive. If you do not have access to the County Transportation Garage or if a County vehicle is not available, a taxicab company can be contacted to provide the ride. There is no cost to you for the County vehicle or taxicab transportation however inappropriate use of this service will require you to reimburse the County for all expenses.

### Supervisor's Guidelines

When a County of Orange employee has an emergency and needs a ride home, they will be directed to contact their supervisor or designee for assistance and to obtain a voucher form. The employee's supervisor or designee must sign the

voucher form and send one copy to the Rideshare Program Office, Bldg. 10, 1st Floor. The transportation provider gets a copy and will complete the bottom portion of the voucher form and retain to bill the Rideshare Program Office. The employee will also retain a copy.

- 1) Supervision should determine the following:
- Verify that the eligibility requirements are met.
- Help employee complete the voucher form.
- Sign the voucher form, make two copies and send the original to the Rideshare Office
- 2) If employee works near or has access to the Transportation Garage on Civic Center Drive:
- Verify that employee has a valid driver's license in their possession. Employee must also be physically able to drive. If not, go to step three.
- Call the transportation garage at (714) 834-2120 to check on availability of a vehicle and to make arrangements. Driver gets a copy of the voucher.
- 3) If the employee does not have access to the County Transportation Garage or if a vehicle is not available:
- The supervisor or employee should call the Coast Yellow Cab Company at (714) 546-1311 or (800) 400-TAXI, and request a cab.
- The employee will talk to the transportation provider to establish the pick up time, location and other logistics.
- Taxi driver gets a copy of voucher form for billing.
  Instruct the employee not to pay the taxi directly.

#### **Voucher Form Distribution**

Original: Rideshare Office, Bldg. 10, 1st Floor

Copy: Taxi Driver or County Transportation Garage

Copy: Employee



# **Guaranteed Return Trip Program Voucher Form**

This form is to be completed only if you need a ride home due to an emergency on a day that you carpooled, walked, biked, vanpooled, took the bus or train to work. This is not to be used when you have driven alone to work or for work related trips.

First Name:		Initial		Last Name:			
				Last Ivallie.	7' 0 1	<u> </u>	
Home Address:		City:			Zip Code:		
Work Address:		City:			Zip Code:		
Agency/Depart.:		Bldg./ roo	om #:		Work Hours:		
Work Phone:			<b>.</b>		Work Days:		
Supervisor Name							(one way)
I declare that the fand hereby agree	you need to use the Guara oregoing information is true thereto. I understand that t sportation survey distributed	e and correct. I ha the County of Ora	ve revie nge will	wed the Guarar pay the Taxi Dr	nteed Return Trip F	Program	Guidelines
Employee Signature					Date		
Supervisor's Signa	ture				Date		
	ne driver must complete t		otal Trip	ID ) Fare: \$	Number:		
Make/Model of Vel		ust complete the		\/abialalia	ense Number:		
	nstructions/Information: Time:			Location: _			
	nd supervisor sign this for Rideshare Office, Bldg. 10,				e as follows:		

County of Orange Commuter Assistance Program, 10 Civic Center Plaza, Bldg. 10, 1st Floor, Santa Ana, CA 92701 (714) 834-4068

Taxi Driver or County Garage

Employee's Copy

Copy: Copy: